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Image# 14940037815

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FURIN 3X   F	or Other Than An Authorized Committee	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼ Example: If typing, type over the lines.	12FE4M5
Americas Health Insura	ance Plans PAC (AHIP PAC)	
ADDRESS (number and street)  Check if different than previously reported. (ACC)	601 Pennsylvania Avenue, NW  South Building, Suite 500  Washington	DC 20004 -
2. FEC IDENTIFICATION NU	IMBER ▼ CITY ▲	STATE ▲ ZIP CODE ▲
C C00106740	3. IS THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q July 15 Quarterly Report (Q October 15 Quarterly Report (Q January 31 Year-End Report (Y July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)	2) PRE-Election Report for the: Convention (12C)  3) Election on (d) 30-Day	(M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
5. Covering Period 12		12 31 2013
·	is Report and to the best of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasurer $\frac{Charl}{}$	Charles W. Stellar  [Electronically Filed]	Date 01 16 2014
	eous, or incomplete information may subject the person sign	ning this Report to the penalties of 2 U.S.C. §437g.
Office Use		FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### Americas Health Insurance Plans PAC (AHIP PAC)

Report Covering the Period: From: 12 01 2013 To: 12 31 2013

		COLUMN A This Period	COLUMN B Calendar Year-to-Date				
6.	(a) Cash on Hand January 1, 2013		43551.88				
	(b) Cash on Hand at Beginning of Reporting Period	28383.63					
	(c) Total Receipts (from Line 19)	11697.07	164395.37				
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	40080.70	207947.25				
7.	Total Disbursements (from Line 31)	9425.72	177292.27				
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30654.98	30654.98				
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00					
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00					

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### Americas Health Insurance Plans PAC (AHIP PAC)

Report Covering the Period: From: 12	01 2013 To			
I. Receipts	COLUMN B Calendar Year-to-Date			
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	11653.31	109932.41		
(i) Itemized (use Schedule A)	7 7	9 9		
(ii) Unitemized	43.76	9462.96		
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)▶	11697.07	119395.37		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	45000.00		
(such as PACs)	0.00	45000.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	11697.07	164395.37		
Totals to Line 33, page 5)  Transfers From Affiliated/Other	1.1001.07	7		
Party Committees	0.00	0.00		
2.5	3.00			
. All Loans Received	0.00	0.00		
. Loan Repayments Received	0.00	0.00		
. Offsets To Operating Expenditures	7	7		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
. Refunds of Contributions Made				
to Federal Candidates and Other				
Political Committees	0.00	0.00		
Other Federal Receipts				
(Dividends, Interest, etc.)	0.00	0.00		
. Transfers from Non-Federal and Levin Funds  (a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(non ochedule rio)	0.00	0.00		
(b) Lovin Funds (from Schodulo HE)	0.00	0.00		
(b) Levin Funds (from Schedule H5)	7 7	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
, , , , , , , , , , , , , , , , , , , ,	7	5.55		
T. 1 B 1111				
. Total Receipts (add Lines 11(d),	11007.07	464005.03		
12, 13, 14, 15, 16, 17, and 18(c))▶	11697.07	164395.37		
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	11697.07	164395.37		
(Sassace Enterto) nom Enterto) minimip		1.5 1050.07		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
21. Operating Expenditures: — (a) Allocated Federal/Non-Federal Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating  Expenditures	925.72	3042.27		
(c) Total Operating Expenditures	025.72	2042 27		
(add 21(a)(i), (a)(ii), and (b))▶  2. Transfers to Affiliated/Other Party	925.72	3042.27		
Committees	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	8500.00	174000.00		
4. Independent Expenditures  (use Schedule E)	0.00	0.00		
5. Coordinated Parfy Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
26. Loan Repayments Made	0.00	0.00		
7. Loans Made	0.00	0.00		
8. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	250.00		
i i		200		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds	0.00	250.00		
(add Lines 28(a), (b), and (c))▶	0.00	250.00		
29. Other Disbursements	0.00	0.00		
<ul><li>Federal Election Activity (2 U.S.C. §431(20))</li><li>(a) Allocated Federal Election Activity</li></ul>				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9425.72	177292.27		
2. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	9425.72	177292.27		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (Nev. 02/2003)		i age <b>3</b>		
III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	11697.07	164395.37		
4. Total Contribution Refunds (from Line 28(d))	0.00	250.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11697.07	164145.37		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	925.72	3042.27		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	925.72	3042.27		

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Jeremy Allen Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 City Zip Code State Transaction ID: 20140103152243-2 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Vice President Americas Health Insurance Plans Receipt For: Aggregate Year-to-Date ▼ Primary General 1749.97 Other (specify) Full Name (Last, First, Middle Initial) B. Jeremy Allen Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 31 2013 City State Zip Code Transaction ID: 20140103152255-2 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Americas Health Insurance Plans Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 1749.97 Other (specify) Full Name (Last, First, Middle Initial) c. Chris Anderson Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 13 2013 City State Zip Code Transaction ID: 20140103152243-1 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.42 С federal political committee. Name of Employer Occupation Associate-Clinical Affairs America's Health Insurance Plans (AHIP Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify) 218.75 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 7 OF 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Chris Anderson Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 31 City Zip Code State Transaction ID: 20140103152255-1 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.42 federal political committee. Name of Employer Occupation Associate-Clinical Affairs America's Health Insurance Plans (AHIP Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify) Full Name (Last, First, Middle Initial) B. Carmella Bocchino Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 13 2013 City State Zip Code Transaction ID: 20140103152243-3 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 208.33 federal political committee. Name of Employer Occupation America's Health Insurance Plans Executive Vice President, Clinical Aff Receipt For: Aggregate Year-to-Date ▼ Primary General 4583.26 Other (specify) Full Name (Last, First, Middle Initial) c. Carmella Bocchino Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 31 2013 City State Zip Code Transaction ID: 20140103152255-3 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 208.33 С federal political committee. Name of Employer Occupation America's Health Insurance Plans Executive Vice President, Clinical Aff Receipt For: Aggregate Year-to-Date ▼ Primary General 4583.26 Other (specify) 427.08 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR	PAGE		8 OF		43	6				
Use separate schedule(s) for each category of the	(che	(check only one)								_	
Detailed Summary Page	X	11a		11b		11c		12			
		13		14		15		16	. [		7

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Americas Health Insurance Plan	ans PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  A. Dianne Bricker		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N Suite 500, South Building	1.W.	12 13 2013
City	State Zip Code	Transaction ID : 20140103152243-4
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer	Occupation	
America's Health Insurance Plans	Regional Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1000.08	
Full Name (Last, First, Middle Initial)  Dianne Bricker		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N Suite 500, South Building	I.W.	12 31 2013
City	State Zip Code	Transaction ID : 20140103152255-4
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer	Occupation	1
America's Health Insurance Plans	Regional Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1000.08	
Full Name (Last, First, Middle Initial)  C. Kathleen Callanan	•	Date of Receipt
Mailing Address 601 Pennsylvania Avenue N Suite 500, South Building		12 13 2013
City Washington	State Zip Code DC 20004	Transaction ID : 20140103152243-5  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	1
America's Health Insurance Plans	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1833.26	
SUBTOTAL of Receipts This Page (optional)		166.67
TOTAL This Period (last page this line number	or only)	

	FOR LINE N	NUMBER:	PAGE	≣ 9 (	OF	4			
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page	X 11a	11b	11c	12					
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Any information copied from such Reports and St or for commercial purposes, other than using the	name and address of any political committee to	
NAME OF COMMITTEE (In Full)	• •	
Americas Health Insurance Plan	ns PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  A. Kathleen Callanan		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.W.	1.	M - M / D - D / Y - Y - Y
Suite 500, South Building		12 31 2013
City	State Zip Code DC 20004	Transaction ID : 20140103152255-5
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.33
Name of Employer	Occupation	
America's Health Insurance Plans	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	33 0	
Other (specify) ▼	1833.26	
Full Name (Last, First, Middle Initial)  Winthrop Cashdollar		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.W	· · · · · · · · · · · · · · · · · · ·	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Suite 500, South Building City	State Zip Code	12 13 2013 Transaction ID : 20140103152243-6
Washington	DC 20004	Transaction ID: 20140103152243-6  Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	62.50
Name of Employer	Occupation	
America's Health Insurance Plans	Executive Director Product Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial)  C. Winthrop Cashdollar		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.W	1.	M = M / D = D / Y = Y = Y
Suite 500, South Building City	State Zip Code	12 31 2013
Washington	DC 20004	Transaction ID: 20140103152255-6  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.50
Name of Employer	Occupation	
America's Health Insurance Plans	Executive Director Product Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1500.00	
Other (specify) ▼	1500.00	
SUBTOTAL of Receipts This Page (optional)		208.33
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 10 OF 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Yvonne Chanatry Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 City Zip Code State Transaction ID: 20140103152243-7 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 104.17 federal political committee. Name of Employer Occupation America's Health Insurance Plans Vice President, Marketing and Graphics Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.08 Other (specify) Full Name (Last, First, Middle Initial) B. Yvonne Chanatry Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 31 2013 City State Zip Code Transaction ID: 20140103152255-7 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 104.17 federal political committee. Name of Employer Occupation America's Health Insurance Plans Vice President, Marketing and Graphics Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.08 Other (specify) Full Name (Last, First, Middle Initial) c. Rebecca Cole Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. 13 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152243-9 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 31.25 С federal political committee. Name of Employer Occupation Director, Public Affairs America's Health Insurance Plans Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 239.59 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Rebecca Cole Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 31 City Zip Code State Transaction ID: 20140103152255-9 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 31.25 federal political committee. Name of Employer Occupation America's Health Insurance Plans Director, Public Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kirstin Dawson Date of Receipt Mailing Address 602 Pennsylvania Avenue N.W. Suite 500, South Building 12 13 2013 City State Zip Code Transaction ID: 20140103152243-11 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.42 federal political committee. Name of Employer Occupation America's Health Insurance Plans Senior Research Associate, Clinical Po Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify) Full Name (Last, First, Middle Initial) c. Kirstin Dawson Date of Receipt Mailing Address 602 Pennsylvania Avenue N.W. 31 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152255-11 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.42 С federal political committee. Name of Employer Occupation America's Health Insurance Plans Senior Research Associate, Clinical Po Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify) 52.09 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	PAGE		12 OF	:	43				
Use separate schedule(s)	(che	(check only one)								
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
_ common common, cage		13		14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Americas Health Insurance Plan	ns PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  A. Gregory Dean  Mailing Address 601 Pennsylvania Avenue N.V.	N.	Date of Receipt
Suite 500, South Building		12 13 2013
City	State Zip Code	Transaction ID : 20140103152243-12
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.50
Name of Employer	Occupation	
America's Health Insurance Plans	Executive Director Insurance Education	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial)  3. Gregory Dean		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.V Suite 500, South Building		12 31 2013
City	State Zip Code	Transaction ID : 20140103152255-12
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	62.50
Name of Employer	Occupation	
America's Health Insurance Plans	Executive Director Insurance Education	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial)  C. Randolph Desonia		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.\ Suite 500, South Building		12 13 2013
City	State Zip Code	Transaction ID : 20140103152243-13
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	
America's Health Insurance Plans	Director, Medicaid Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional)		135.00
TOTAL This Period (last page this line number	only)	

	FO	FOR LINE NUMBER: PAG							F	43
Use separate schedule(s)	(che	(check only one)								
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
,		13		14		15		16		17

	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) Americas Health Insurance Pla	ns PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  A. Randolph Desonia  Mailing Address 601 Pennsylvania Avenue N.	W	Date of Receipt
Suite 500, South Building	vv.	12 31 _ 2013 _
City	State Zip Code	Transaction ID : 20140103152255-13
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00
Name of Employer	Occupation	
America's Health Insurance Plans	Director, Medicaid Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
Full Name (Last, First, Middle Initial)  Mary Beth Donahue		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.	N.	M = M / D = D / Y = Y = Y
Suite 500, South Building City	State Zip Code	12 13 2013 17 17 17 17 17 17 17 17 17 17 17 17 17
Washington	DC 20004	Transaction ID : 20140103152243-14  Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	208.33
Name of Employer	Occupation	
America's Health Insurance Plans	Executive VP, Policy & Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	4583.26	
Full Name (Last, First, Middle Initial)  C. Mary Beth Donahue		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.	NA/	
Suite 500, South Building	vv.	12 31 _ 2013 _
City	State Zip Code	Transaction ID : 20140103152255-14
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.33
Name of Employer	Occupation	
America's Health Insurance Plans	Executive VP, Policy & Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	4583.26	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	426.66
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 14 OF 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Daniel Durham Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 City Zip Code State Transaction ID: 20140103152243-16 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 208.33 federal political committee. Name of Employer Occupation America's Health Insurance Plans **Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General 4999.92 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel Durham Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 31 2013 City State Zip Code Transaction ID: 20140103152255-15 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 208.33 federal political committee. Name of Employer Occupation America's Health Insurance Plans **Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General 4999.92 Other (specify) Full Name (Last, First, Middle Initial) c. Paul Eiting Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. 13 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152243-17 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation America's Health Insurance Plans **Deputy Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 927.14 Other (specify) 458.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 15 OF 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

Candy Gallaher

Date of Receipt

Mailing Address 601 Pennsylvania Avenue N.W.  Suite 500, South Building  City  Washington  DC  20004  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	/			
City Washington DC 20004  FEC ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans Receipt For:  Primary General Other (specify) ▼ 1000.08  FUI Name (Last, First, Middle Initial) Candy Gallaher  Fec ID number of contributing federal political committee.  City Sainte 500, South Building City Washington DC 20004  FEC ID number of contributing federal political committee.  Cocupation  Senior Vice President  Aggregate Year-to-Date ▼ 12 31 2013  Transaction ID: 20140103152235-18  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Alt.67  Transaction ID: 20140103152234-19  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C Learne Cassaway  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building City Washington DC 20004  FEC ID number of contributing federal political committee.  C Learne Cassaway  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building City Washington  FEC ID number of contributing federal political committee.  C 27.08  Suite 500 South Building City Grant December Occupation  Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 649.92  SUBTOTAL of Receipts This Page (optional)	Α.	Candy Gallaher  Mailing Address 601 Pennsylvania Avenue N.V	M = M / D = D / Y = Y = Y	
Mashington FEC. ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans Receipt For: Primary General Other (specify) ▼ 1000.08  Full Name (Last, First, Middle Initial) B. Candy Gallaher Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building City Washington DC 20004  FEC. ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans Receipt For: Primary General Other (specify) ▼ 1000.08  Full Name (Last, First, Middle Initial) C. Leanne Gassaway Washington DC 20004  Fell Name (Last, First, Middle Initial) C. Leanne Gassaway Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building City Washington Date of Receipt  Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.08  Date of Receipt  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼ 1000.08  Date of Receipt  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼ 1000.08  Date of Receipt  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼ 1000.08  Date of Receipt  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼ 1000.08  Date of Receipt  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼ 1000.08  Date of Receipt  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼ 1000.08			State Zip Code	
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Receipt For:    Primary   General   1000.08		Name of Employer	Occupation	
Primary   General   Cher (specify) ▼   1000.08		America's Health Insurance Plans	Senior Vice President	
B. Candy Gallaher  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building City State Zip Code DC 20004  FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) ▼  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building Ct. Leanne Gassaway  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building City State Zip Code Washington  DC 20004  FEC ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans  Receipt For: Quantification State Zip Code Washington  DC 20004  FEC ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Classification D: 20140103152243-20  Amount of Each Receipt this Period  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  SubstotAL of Receipts This Page (optional).  Date of Receipt  Transaction ID: 20140103152235-18  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼		Primary General		
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Receipt For:  Primary General Other (specify)  Aggregate Year-to-Date  C. Leanne Gassaway Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building City State Zip Code Washington  FEC ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans Receipt For: Primary General Other (specify)  Aggregate Year-to-Date  Amount of Each Receipt this Period		Name of Employer	Occupation	
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Primary General Other (specify) ▼ 1000.08  Full Name (Last, First, Middle Initial)  C. Leanne Gassaway  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For: Primary  General  Other (specify) ▼  Substite 500, South Building  C  DC 20004  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Regional Director  Regional Director  Regional Director  Receipt For: Primary General Other (specify) ▼  Substitution  Aggregate Year-to-Date ▼		Receipt For:	Aggregate Vear-to-Date ▼	
C. Leanne Gassaway  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building  City Washington  FEC ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans  Receipt For: Primary Other (specify) ▼  Subtof Receipt  Date of Receipt  MM M 12 13 2013  Transaction ID: 20140103152243-20  Amount of Each Receipt this Period  27.08  Aggregate Year-to-Date ▼  Subtotal of Receipts This Page (optional)			55 0	
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federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  SUBTOTAL of Receipts This Page (optional)		Washington	DC 20004	Amount of Each Receipt this Period
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NAME OF COMMITTEE (In Full) Americas Health Insurance Pla	ns PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  Leanne Gassaway  Mailing Address 601 Pennsylvania Avenue N.  Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify)	W.  State Zip Code DC 20004  C  Occupation Regional Director  Aggregate Year-to-Date ▼  649.92	Date of Receipt  12 31 2013  Transaction ID: 20140103152255-19  Amount of Each Receipt this Period  27.08
Full Name (Last, First, Middle Initial)  Cynthia Goff  Mailing Address 601 Pennsylvania Avenue N. Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  BlueCross and BlueShield of Minnesota  Receipt For: Primary General Other (specify)	W.  State Zip Code DC 20004  C  Occupation Executive Director  Aggregate Year-to-Date ▼  1062.50	Date of Receipt  12 13 2013  Transaction ID: 20140103152243-21  Amount of Each Receipt this Period  62.50
Full Name (Last, First, Middle Initial)  Cynthia Goff  Mailing Address 601 Pennsylvania Avenue N. Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  BlueCross and BlueShield of Minnesota  Receipt For: Primary General Other (specify)	W.  State Zip Code DC 20004  C  Occupation Executive Director  Aggregate Year-to-Date ▼  1062.50	Date of Receipt  12 31 2013  Transaction ID: 20140103152255-20  Amount of Each Receipt this Period  62.50
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America's Health Insurance Plans

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Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.08	
Full Name (Last, First, Middle Initial)  C. Burt Hudson  Mailing Address 601 Pennsylvania Aven  Suite 500, South Buildir  City		Date of Receipt  12 31 2013
Washington  FEC ID number of contributing federal political committee.	DC 20004	Transaction ID : 20140103152255-23  Amount of Each Receipt this Period  41.67
Name of Employer  America's Health Insurance Plans  Receipt For:  Primary General  Other (specify) ▼	Occupation Deputy Director, Client Learning Servi  Aggregate Year-to-Date ▼  1000.08	_
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Deputy Director, Client Learning Servi

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Americas Health Insurance Pla  Full Name (Last, First, Middle Initial)  Karen Ignagni  Mailing Address 601 Pennsylvania Ave NW  S Building, Suite 500  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20004-2601  C  Occupation President and CEO  Aggregate Year-to-Date   5000.00	Date of Receipt  12 20 2013  Transaction ID: DB5C7E99136F40FC9A1  Amount of Each Receipt this Period  2500.00
Full Name (Last, First, Middle Initial)  Karen Ignagni  Mailing Address 601 Pennsylvania Ave NW S Building, Suite 500  City Washington  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code DC 20004-2601  C	Date of Receipt  12 20 2013  Transaction ID: EF6CE3FFB70047AEA33  Amount of Each Receipt this Period  2500.00
America's Health Insurance Plans  Receipt For:  Primary General  Other (specify) ▼	President and CEO  Aggregate Year-to-Date ▼  5000.00	
Full Name (Last, First, Middle Initial)  Erik Komendant  Mailing Address 601 Pennsylvania Ave NW Suite 500, South Building  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General	State Zip Code DC 20004-2601  C  Occupation Vice President  Aggregate Year-to-Date ▼	Date of Receipt  12 20 2013  Transaction ID: 842FDE129A054BD29986  Amount of Each Receipt this Period  1000.00
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		6000.00

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Crystal Kuntz Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 City Zip Code State Transaction ID: 20140103152243-27 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Vice President America's Health Insurance Plans Receipt For: Aggregate Year-to-Date ▼ Primary General 1583.27 Other (specify) Full Name (Last, First, Middle Initial) B. Crystal Kuntz Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 31 2013 City State Zip Code Transaction ID: 20140103152255-27 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation America's Health Insurance Plans Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 1583.27 Other (specify) Full Name (Last, First, Middle Initial) **c.** Barbara Lardy Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. 13 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152243-28 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Senior Vice President, Clinical Affair America's Health Insurance Plans Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.08 Other (specify) 208.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)  Americas Health Insurance Plans PA	AC (AHIP PAC)	
America's Health Insurance Plans Senic	'	Date of Receipt  12 31 2013  Transaction ID: 20140103152255-28  Amount of Each Receipt this Period  41.67
America's Health Insurance Plans  Svp, 0	'	Date of Receipt  12 13 2013  Transaction ID: 20140103152243-29  Amount of Each Receipt this Period  125.00
America's Health Insurance Plans Senic	•	Date of Receipt  12 13 2013  Transaction ID: 20140103152243-30  Amount of Each Receipt this Period  83.33
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Occupation

Program Manager

Aggregate Year-to-Date ▼

Name of Employer

Primary

Receipt For:

America's Health Insurance Plans

Other (specify)

General

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Amber Manko Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 City Zip Code State Transaction ID: 20140103152243-32 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 15.21 federal political committee. Name of Employer Occupation America's Health Insurance Plans Administrative Assistant, Federal Affa Receipt For: Aggregate Year-to-Date ▼ Primary General 370.66 Other (specify) Full Name (Last, First, Middle Initial) B. Amber Manko Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 31 2013 City State Zip Code Transaction ID: 20140103152255-32 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 20.83 federal political committee. Name of Employer Occupation America's Health Insurance Plans Administrative Assistant, Federal Affa Receipt For: Aggregate Year-to-Date ▼ Primary General 370.66 Other (specify) Full Name (Last, First, Middle Initial) c. Debi Manning Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. 13 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152243-33 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation America's Health Insurance Plans Director of Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 56.04 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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TEMIZED RECEIPTS			for each category of the Detailed Summary Page	X   11a
	ry information copied from such Reports and State for commercial purposes, other than using the			
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Americas Health Insurance Plan	s PAC (/	AHIP PAC)	
Δ.	Full Name (Last, First, Middle Initial)  Debi Manning  Mailing Address 601 Pennsylvania Avenue N.W  Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify)	Date of Receipt  12 31 2013  Transaction ID: 20140103152255-33  Amount of Each Receipt this Period  20.00		
3.	Full Name (Last, First, Middle Initial)  Anthony Meoni  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify) ▼	State DC  C Occupation Vice Preside		Date of Receipt  12 13 2013  Transaction ID: 20140103152243-35  Amount of Each Receipt this Period  10.50
<b>c</b> .	Full Name (Last, First, Middle Initial)  Anthony Meoni  Mailing Address 601 Pennsylvania Avenue N.W  Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify)	State DC  C Occupation Vice Presid		Date of Receipt  12 31 2013  Transaction ID: 20140103152255-35  Amount of Each Receipt this Period  10.50
S	SUBTOTAL of Receipts This Page (optional)			41.00
Т	OTAL This Period (last page this line number o	nly)		

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Т	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check or X 11a 13		e) 11b 14	11c	12		7
	y information copied from such Reports and Sta for commercial purposes, other than using the						oliciting	contr	ibutions	
$\rangle$	NAME OF COMMITTEE (In Full) Americas Health Insurance Plan	s PAC (A	AHIP PAC)							
Δ.	Full Name (Last, First, Middle Initial)  Thomas Meyers  Mailing Address 601 Pennsylvania Avenue N.W  Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary General Other (specify) ▼	State DC  Occupation Executive D	Zip Code 20004 Director Product Policy Year-to-Date ▼		M /	teipt  13  on ID: 2  Each Re		2013 <b>31522</b>	43-36	]
3.	Full Name (Last, First, Middle Initial)  Thomas Meyers  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify) ▼	State DC  C Occupation Executive D	Zip Code 20004  iirector Product Policy  Year-to-Date ▼  480.00		sactio	31 on ID: 2 Each Re			55-36	]
<b>C.</b>	Full Name (Last, First, Middle Initial)  Joseph Miller  Mailing Address 601 Pennsylvania Avenue N.W  Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify)	State DC  C Occupation General Co			m /	ceipt  13  on ID: 2  Each Re		2013 <b>31522</b> nis Per	43-37	]
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Т	OTAL This Period (last page this line number o	nly)	·····			,			-	

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Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Americas Health Insurance Plans	s PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  Joseph Miller  Mailing Address 601 Pennsylvania Avenue N.W.  Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20004  C  Occupation General Counsel  Aggregate Year-to-Date ▼	Date of Receipt  12 31 2013  Transaction ID: 20140103152255-37  Amount of Each Receipt this Period  104.17
Full Name (Last, First, Middle Initial)  Julie Miller  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20004  C  Occupation Senior Associate Counsel  Aggregate Year-to-Date ▼  1354.19	Date of Receipt  12 13 2013  Transaction ID: 20140103152243-38  Amount of Each Receipt this Period  62.50
Full Name (Last, First, Middle Initial)  Julie Miller  Mailing Address 601 Pennsylvania Avenue N.W Suite 500, South Building  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary General Other (specify)	State Zip Code DC 20004  C  Occupation Senior Associate Counsel  Aggregate Year-to-Date ▼  1354.19	Date of Receipt  12 31 2013  Transaction ID: 20140103152255-38  Amount of Each Receipt this Period  62.50
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		229.17

	FOF	R LINE	NU	IMBER	:	PAGE	2	8 O	ıF	43
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		٦1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Lisa Miller Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 City Zip Code State Transaction ID: 20140103152243-39 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.42 federal political committee. Name of Employer Occupation America's Health Insurance Plans Deputy Director, Meeting Services Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Miller Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 31 2013 City State Zip Code Transaction ID: 20140103152255-39 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.42 federal political committee. Name of Employer Occupation America's Health Insurance Plans Deputy Director, Meeting Services Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify) Full Name (Last, First, Middle Initial) c. Martin Mitchell Jr. Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. 13 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152243-40 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 20.83 С federal political committee. Name of Employer Occupation **Director Product Policy** America's Health Insurance Plans Receipt For: Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional)			7	I	I	7			41.67	
TOTAL This Period (last page this line number only)			7	Ξ	_	7	_	_	_	

499.92

Primary

Other (specify)

General

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Any or fo	information copied from such Reports and Star commercial purposes, other than using the	atements ma	ly not be sold or used by any peddress of any political committee	rson for the purpose of soliciting contributions
\	AME OF COMMITTEE (In Full) Americas Health Insurance Plan	s PAC (A	AHIP PAC)	
CC V FF fee RN AA	All Name (Last, First, Middle Initial)  Martin Mitchell Jr.  ailing Address 601 Pennsylvania Avenue N.W  Suite 500, South Building  ity  Vashington  EC ID number of contributing deral political committee.  ame of Employer  merica's Health Insurance Plans eceipt For:  Primary General  Other (specify)	State DC  C Occupation Director Pro		Date of Receipt  12 31 2013  Transaction ID: 20140103152255-40  Amount of Each Receipt this Period  20.83
B. N	ull Name (Last, First, Middle Initial) Feresa Mulligan ailing Address 601 Pennsylvania Avenue N.W Suite 500, South Building ity Vashington EC ID number of contributing deral political committee. ame of Employer merica's Health Insurance Plans eceipt For:  Primary General Other (specify) ▼	State DC  C Occupation Executive D		Date of Receipt  12 13 2013  Transaction ID: 20140103152243-8  Amount of Each Receipt this Period  14.58
C. M	ull Name (Last, First, Middle Initial)  Teresa Mulligan  ailing Address 601 Pennsylvania Avenue N.W  Suite 500, South Building  ity  Vashington  EC ID number of contributing deral political committee.  ame of Employer  merica's Health Insurance Plans eceipt For:  Primary General  Other (specify) ▼	State DC  C Occupation Executive D		Date of Receipt  12 31 2013  Transaction ID: 20140103152255-8  Amount of Each Receipt this Period  14.58
SUE	BTOTAL of Receipts This Page (optional)			49.99
TO	TAL This Period (last page this line number o	nly)		

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for each category of the Detailed Summary Page		X	11a		11b	11c		12	
			13		14	15		16	17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Americas Health Insurance Pla	ns PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  Susan Pisano  Mailing Address 601 Pennsylvania Avenue N.	W.	Date of Receipt
Suite 500, South Building		12 13 2013
City	State Zip Code	Transaction ID : 20140103152243-41
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	134.39
Name of Employer	Occupation	
America's Health Insurance Plans	Vice President Strategic Communication	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  3225.36	
Full Name (Last, First, Middle Initial)  3. Susan Pisano		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.	W.	M = M / D = D / Y = Y = Y
Suite 500, South Building	01-1-	12 31 2013
City	State Zip Code	Transaction ID : 20140103152255-41
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	134.39
Name of Employer	Occupation	
America's Health Insurance Plans	Vice President Strategic Communication	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3225.36	
Full Name (Last, First, Middle Initial)  Lawrence Platt		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N. Suite 500, South Building		12 13 2013
City Washington	State Zip Code DC 20004	Transaction ID: 20140103152243-42  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	
America's Health Insurance Plans	Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	1999.92	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	352.11
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 31 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Lawrence Platt Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 31 City Zip Code State Transaction ID: 20140103152255-42 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation America's Health Insurance Plans Director Receipt For: Aggregate Year-to-Date ▼ Primary General 1999.92 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Pratt Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 13 2013 City State Zip Code Transaction ID: 20140103152243-43 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation America's Health Insurance Plans Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mark Pratt Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 31 2013 City State Zip Code Transaction ID: 20140103152255-43 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation Senior Vice President America's Health Insurance Plans Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) 333.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 32 OF 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Ingrid Reeves Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 City Zip Code State Transaction ID: 20140103152243-45 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 20.83 federal political committee. Name of Employer Occupation Vice President, Membership America's Health Insurance Plans Receipt For: Aggregate Year-to-Date ▼ Primary General 499.92 Other (specify) Full Name (Last, First, Middle Initial) B. Ingrid Reeves Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 31 2013 City State Zip Code Transaction ID: 20140103152255-45 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 20.83 federal political committee. Name of Employer Occupation America's Health Insurance Plans Vice President, Membership Receipt For: Aggregate Year-to-Date ▼ Primary General 499.92 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Shreve Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. 13 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152243-46 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Senior Vice President, Professional Pr America's Health Insurance Plans Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.08 Other (specify) 83.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)	
Americas Health Insurance Plans PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  1. Lisa Shreve	Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building	12 31 _ 2013 _
City State Zip Code	Transaction ID : 20140103152255-46
Washington DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	41.67
Name of Employer Occupation	-
America's Health Insurance Plans Senior Vice President, Professional Pr	
Receipt For: Aggregate Year-to-Date ▼	1
Primary General	
Other (specify) ▼ 1000.08	
Full Name (Last, First, Middle Initial)  Charles Stellar	Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.W.	M M / D D / Y Y Y Y Y
Suite 500, South Building City State Zip Code	12 13 2013
Washington DC 20004	Transaction ID : 20140103152243-48
	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	104.17
Name of Employer Occupation	1
America's Health Insurance Plans Executive V.P.	
Receipt For:  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 2500.08	
Full Name (Last, First, Middle Initial) Charles Stellar	Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.W.	M = M / D = D / Y = Y = Y
Suite 500, South Building	12 31 2013
City State Zip Code	Transaction ID: 20140103152255-48
Washington DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	104.17
Name of Employer Occupation	1
America's Health Insurance Plans Executive V.P.	
Receipt For: Aggregate Year-to-Date ▼	
Primary General	
Other (specify) ▼ 2500.08	
SUBTOTAL of Receipts This Page (optional)	250.01
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)								
Americas Health Insurance Pl	ans PAC (AHIP PAC)							
Full Name (Last, First, Middle Initial)  Kristin Stewart Smoot		Date of Receipt						
Mailing Address 601 Pennsylvania Avenue		M M / D D / Y Y Y Y						
Suite 500, South Building		12 13 2013						
City	State Zip Code	Transaction ID : 20140103152243-49						
Washington	DC 20004	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	20.83						
Name of Employer	Occupation	†						
AHIP	Manager, Special Projects							
Receipt For:	Aggregate Year-to-Date ▼							
Primary General	00 0							
Other (specify) ▼	499.92							
Full Name (Look First Made Land								
Full Name (Last, First, Middle Initial)  3. Kristin Stewart Smoot		Date of Receipt						
Mailing Address 601 Pennsylvania Avenue I	N.W.	M = M / D = D / Y = Y = Y						
Suite 500, South Building	State Zip Code	12 31 2013						
City	Transaction ID: 20140103152255-49							
Washington	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С	20.83						
Name of Employer	Occupation	1						
AHIP	Manager, Special Projects							
Receipt For:	Aggregate Year-to-Date ▼							
Primary General	400.00							
Other (specify) ▼	499.92							
Full Name (Last, First, Middle Initial)  C. Rachel Terry	1	Date of Receipt						
Mailing Address 601 Pennsylvania Avenue	N.W.	M = M / D = D / Y = Y = Y						
Suite 500, South Building		12 13 2013						
City	State Zip Code	Transaction ID : 20140103152243-50						
Washington	DC 20004	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	20.83						
Name of Employer	Occupation	1						
America's Health Insurance Plans								
Receipt For:								
Primary General								
Other (specify) ▼	354.11							
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		13		14		15		16		71

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Rachel Terry Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 31 City Zip Code State Transaction ID: 20140103152255-50 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 20.83 federal political committee. Name of Employer Occupation America's Health Insurance Plans Senior Director, Business Development Receipt For: Aggregate Year-to-Date ▼ Primary General 354.11 Other (specify) Full Name (Last, First, Middle Initial) B. Aaron Tucker Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 13 2013 City State Zip Code Transaction ID: 20140103152243-51 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.42 federal political committee. Name of Employer Occupation America's Health Insurance Plans Senior Legislative & Regulatory Analys Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify) Full Name (Last, First, Middle Initial) c. Aaron Tucker Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. 31 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152255-51 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.42 С federal political committee. Name of Employer Occupation America's Health Insurance Plans Senior Legislative & Regulatory Analys Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify)

41.67

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		13		14		15		16		117

	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) Americas Health Insurance Pl	lans PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  A. Claudia Tucker		Date of Receipt
Mailing Address 601 Pennsylvania Avenue Suite 500, South Building	N.W.	M = M / D = D / Y = Y = Y
City	State Zip Code	12 13 2013 Transaction ID : 20140103152243-52
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
America's Health Insurance Plans	Regional Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial)  Claudia Tucker		Date of Receipt
Mailing Address 601 Pennsylvania Avenue I	N.W.	M = M / D = D / Y = Y = Y
Suite 500, South Building City	State Zip Code	12 31 2013
Washington	DC 20004	Transaction ID: 20140103152255-52  Amount of Each Receipt this Period
	2000	Allount of Each Neceipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
America's Health Insurance Plans	Regional Director	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial)  C. Kathleen Turner		Date of Receipt
Mailing Address 601 Pennsylvania Avenue Suite 500, South Building		12
City Washington	State Zip Code DC 20004	Transaction ID : 20140103152243-53
	20001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer	Occupation	
America's Health Insurance Plans	Senior Manager of Visual Communication	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Curer (specify)	300.00	
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	112.50
TOTAL This Period (last page this line numb	er only)	

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TEMIZED RECEIPTS	for each category of the  Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the r		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Americas Health Insurance Plans	s PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  A. Kathleen Turner  Mailing Address 601 Pennsylvania Avenue N.W.  Suite 500, South Building  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20004  C  Occupation Senior Manager of Visual Communication  Aggregate Year-to-Date ▼  300.00	Date of Receipt  12 31 2013  Transaction ID: 20140103152255-53  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  Mark Van Koevering  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building  City Washington  FEC ID number of contributing federal political committee.  Name of Employer America's Health Insurance Plans  Receipt For:  Primary General Other (specify)	State Zip Code DC 20004  C  Occupation  Executive Director  Aggregate Year-to-Date ▼	Date of Receipt  12 13 2013  Transaction ID: 20140103152243-54  Amount of Each Receipt this Period  83.33
Full Name (Last, First, Middle Initial)  Mark Van Koevering  Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  America's Health Insurance Plans  Receipt For: Primary General Other (specify)	State Zip Code DC 20004  C  Occupation  Executive Director  Aggregate Year-to-Date ▼  1999.92	Date of Receipt  12 31 2013  Transaction ID: 20140103152255-54  Amount of Each Receipt this Period  83.33
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	179.16

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for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12	
	13	14	15	16	

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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Americas Health Insurance Plan	ns PAC (AHIP PAC)	
Full Name (Last, First, Middle Initial)  A. Brenda Weigel  Mailing Address 601 Pennsylvania Avenue N.V.	V	Date of Receipt
Suite 500, South Building	••	12 13 2013
City	State Zip Code	Transaction ID : 20140103152243-55
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.83
Name of Employer	Occupation	
America's Health Insurance Plans	Digital Media Coordinator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	395.79	
Full Name (Last, First, Middle Initial)  3. Brenda Weigel		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.V	v.	M = M / D = D / Y = Y = Y
Suite 500, South Building	State 7in Code	12 31 2013
City	State Zip Code DC 20004	Transaction ID : 20140103152255-55
Washington	20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.83
Name of Employer	Occupation	
America's Health Insurance Plans	Digital Media Coordinator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	395.79	
Full Name (Last, First, Middle Initial)  C. Marilyn Zigmund Luke		Date of Receipt
Mailing Address 601 Pennsylvania Avenue N.V. Suite 500, South Building		12
City	State Zip Code DC 20004	Transaction ID: 20140103152243-56
Washington	DC 20004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00
Name of Employer	Occupation	
America's Health Insurance Plans	Senior Counsel and Compliance Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional)		51.66
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 39 OF 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Americas Health Insurance Plans PAC (AHIP PAC) Full Name (Last, First, Middle Initial) Marilyn Zigmund Luke Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 2013 12 31 City Zip Code State Transaction ID: 20140103152255-56 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation America's Health Insurance Plans Senior Counsel and Compliance Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert Zirkelbach Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. Suite 500, South Building 12 13 2013 City State Zip Code Transaction ID: 20140103152243-57 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 104.17 federal political committee. Name of Employer Occupation America's Health Insurance Plans Press Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.08 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Zirkelbach Date of Receipt Mailing Address 601 Pennsylvania Avenue N.W. 31 2013 Suite 500, South Building City State Zip Code Transaction ID: 20140103152255-57 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing С 104.17 federal political committee. Name of Employer Occupation America's Health Insurance Plans **Press Secretary** Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.08 Other (specify) 218.34 SUBTOTAL of Receipts This Page (optional)..... 11653.31 TOTAL This Period (last page this line number only).....

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S	CHEDULE B (FEC Form 3X)	l		FO	R LINE	NUMBER	₹:			PAGE	40	OF	43			
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(01)		·			only one)							
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	NAME OF COMMITTEE (In Full)															
$ \rangle$	Americas Health Insurance Plans F	PAC (AF	HP PAC)													
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٨	Full Name (Last, First, Middle Initial)					Date	of Die	shurco	mont							
Α.	Citibank					Date (		buise			Y					
	Mailing Address 1101 Pennsylvania Ave, NW					12	, ,	0:	_		2013	_ '				
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	•	State DC	Zip Code 20004			Tran	sacti	on ID	: BB	FEF2E	1624C	E38D	2F5			
	Washington Purpose of Disbursement	DC	20004			-										
	Merchant Bankcard Fees			00	)1	Amou	nt of	Each	Disb	urseme	nt this	Perio	od			
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	State: District:	` '	<i>37</i> , <b>4</b>													
	Full Name (Last, First, Middle Initial)															
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	Mailing Address 1101 Pennsylvania Ave, NW 11th Floor					12		-	U	-	2013					
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C.	DDC Advocacy					Date	of Dis	sburse	ment	:						
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	Mailing Address PO Box 632303					12	_	0:	9		2013					
	City	State	Zip Code			<u> </u>										
	Baltimore	MD	21263-2303			Tran	sacti	ion ID	: V8	8551F6	3AB3E	3E500	C09D			
	Purpose of Disbursement Vendor service fees															
	Candidate Name			00		Amoui	nt of	Each	Disb	urseme	nt this	Perio	od			
	Canadate Name			Cate:							68	7.50				
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S	CHEDULE B (FEC Form 3X)		$\overline{}$	FOR	LINE	NUMBER: PAGE 41 OF							43
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the		(chec	k only	one)	_	٦.٥٥					00
		Detailed Summary Page		×	21b 27	22 28a	<u> </u>	23 28b		24 28c	25 29		26 30b
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	for commercial purposes, other than using the name												
	NAME OF COMMITTEE (In Full)												
	Americas Health Insurance Plans F	PAC (AHIP PAC)											
_	Full Name (Last, First, Middle Initial)					_							
Α.	Paypal					Date o							
	Mailing Address 12312 Port Grace Boulevard					12		2	_		2013	Y	
	,	State Zip Code				Tran	sact	ion ID	· V2	26AC29I	C7RR	Δ174/	1127
	La Vista Purpose of Disbursement	NE 68128				IIaii	saci	טוו ווטו	. V2	.UAC231	JC1 DD	A 1 / 4-	1121
	PayPal fees			001		Amour	nt of	Each	Disk	ourseme	nt this	Period	t
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		Primary General											
		Other (specify) ▼											
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	Mailing Address						_						
	City	State Zip Code											
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	President State: District:	Other (specify) ▼											
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	Mailing Address						1						
	City	State Zip Code											
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Т	TOTAL This Period (last page this line number only).				•			7		,	92	5.72	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 42 OF 43
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)	
	Detailed Summary Page	.       210		25 26
Г		27		8c 29 30k
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may not be sold or usine and address of any poli-	used by any perso	on for the purpose of solid	citing contributions
NAME OF COMMITTEE (In Full)	inc and address of any pon	tical committee to	Solicit Contributions from	Such committee.
I \ ' '				
Americas Health Insurance Plans	PAC (ANIP PAC)			
Full Name (Last, First, Middle Initial)				
A. Every Republican Is Crucial (ERIC	CPAC)		Date of Disbursement	
Mailian Address OF F.M.: O.			M M / D D /	Y
Mailing Address 25 E Main Street Suite 200			12 03	2013
City	State Zip Code			
Richmond	VA 23219-2109		Transaction ID: 5CB	D9A603647D3EA3D1
Purpose of Disbursement				
2013 Contribution		011	Amount of Each Disbu	rsement this Period
Candidate Name		Category/		2500.00
Every Republican Is Crucial (ERIC		Type		2500.00
	ement For: 2013			
Senate	Primary General			
State: President State:	Other (specify) ▼ Contributio	un.		
Full Name (Last, First, Middle Initial)	Contributio	''''		
B. Friends of John Thune			Date of Disbursement	
5. Friends of John Thurie				V V V
Mailing Address PO Box 841			12 17	2013
3 G G G G G G G G G G G G G G G G G G G				
City	State Zip Code		Transaction ID : E5D	05603FF669971736
Sioux Falls	SD 57101		Transaction ib . Lob	030031 200337 1730
Purpose of Disbursement 2016 Primary		044	Amount of Fool Dishu	was was and this Davis d
Candidate Name		011	Amount of Each Disbu	rsement this Period
John Randolph Thune		Category/		1500.00
	ement For: 2016	Туре	7	
	Primary General			
President	Other (specify)			
State: SD District:				
Full Name (Last, First, Middle Initial)				
C. McConnell Senate Committee '14			Date of Disbursement	
			M M / D D /	Y Y Y Y
Mailing Address PO Box 1496			12 17	2013
City	State Zip Code			
City Louisville	KY 40201		Transaction ID : BB8	770E117E6FA1B44C
Purpose of Disbursement	10201			
2014 Primary		011	Amount of Each Disbu	rsement this Period
Candidate Name		Category/	7 tilloditt of Edolf Blood	
Mitch McConnell		Type		2500.00
Office Sought: House Disburs	ement For: 2014		,	,
X Senate	Primary General			
President	Other (specify) ▼			
State: KY District:				
				0500.00
SUBTOTAL of Disbursements This Page (optional)		·····		6500.00
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SCHEDULE B (FEC Form 3X)	Han any such a 1 1 1 1 1	, FOR LINE	NUMBER:	PAGE 43 OF 43
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orliny	,	¬., ¬., —
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or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)				
$ \; angle$ Americas Health Insurance Plans F	PAC (AHIP PAC)			
Full Name (Last, First, Middle Initial)				
A. Richmond for Congress			Date of Disbursem	ent
NA 27 A 11			M M / D D	/
Mailing Address 1631 Elysian Fields Suite 150			12 10	2013
	State Zip Code		: ID	F0F4F00D0004F0F4D44
New Orleans	LA 70126		Transaction ID :	F0F4E0CD680A5071B41
Purpose of Disbursement 2014 Primary		011	Amount of Each Di	isbursement this Period
Candidate Name			Amount of Each Bi	isbursement this renou
Cedric L. Richmond		Category/ Type		1000.00
	nent For: 2014			
	Primary General			
State: LA District: 02	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Sean Patrick Maloney for Congres	S		Date of Disbursem	ent
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Mailing Address PO Box 270			12 10	2013
City	State Zip Code		Transaction ID	61C271760BAFBCAF6E
Newburgh	NY 12550		Transaction ib .	01C2/1/00DAFBCAF0E
Purpose of Disbursement 2014 Primary		011	Amount of Each Di	isbursement this Period
Candidate Name			Amount of Euch B	isbarocinent tino i criod
Sean Patrick Maloney		Category/ Type		1000.00
Office Sought: House Disburser	nent For: 2014			
	Primary General			
State: NY District: 18	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
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Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
ו מוףטספ טו טוסטעוספווופוונ		Amount of Each D	isbursement this Period	
Candidate Name	Category/	AMOUNT OF LACTIO	isbursement tills Fellou	
		Type		7
Office Sought: House Disburser				
Senate President	Primary General Other (specify) ▼			
State: District:	onioi (opeony) ▼			
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				0500.00
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